24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
House Majority PAC	
	C C00495028
Check if 24-hour report X 48-hour report New report Amends report filed	d on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Aerial Messages	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1500 Beville Rd	08 07 2016 Amount
Ste 606-208	
City State Zip Code	1210.00
Daytona Beach FL 32114-5646	Transaction ID : VN7GDA24ST0 Date of Disbursement or Obligation
Purpose of Expenditure Aerial Advertising - Estimate Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate Support Office	e Sought: X House District: 05
Scott Garrett Oppose	President Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For: Primary ⊠ General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	
	Amount
City State Zip Code	
Purpose of Expenditure Category/	Date of Disbursement or Obligation
Type	
Name of Federal Candidate Support Offic	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Disb	ursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1210.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(c) TOTAL Independent Expenditures	1210.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Alixandria Lann	
	08 09 2016
Signature	